

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

) (C-) (C-)										
Complete this report in duplicate at the time Send copy to Department of Health and Sen				whenever instrument is repaired.						
ALCO SENSOR IV SN 0904801 Oakview MO	PRINTER SN 097.3584.332		[DATE OF INSPECTION 03/04/2015						
LOCATION OF INSTRUMENT (STREET AND CITY) 6404 N. Locust, Oakview MO 64118 Oa	7	rime of inspection 10:01 pm								
CHECKLIST: Place a mark in the box by eac			ng within establis	hed limits. (Write in observed val-						
ues where determined.) Unmarked items mu	st be corrected before u	sing instrument.								
DIGITAL READOUT (ALL ELEMENTS C	PERATIONAL)									
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)										
PRINTER WORKING PROPERLY										
☑ TIME AND DATE DISPLAYING PROPERLY										
BREATH ALCOHOL ACCURACY STANDA	RDS		gitti China Walitalia ka							
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE										
STANDARD SUPPLIER Guth Labortatories LOT # 14220 EXP. DATE 09/24/2016										
SIMULATOR TEMPERATURE (34°C ± 0	0.2°C)34SIM	ULATOR SN 09	3752 SIMUL	ATOR EXP DATE 03/11/2015						
Run three tests using a standard solution less. Check the box corresponding to the 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	standard solution being BETWEEN 0.095% and BETWEEN 0.076% and	used. (PRINTOUT / 1 0.105% INCLUSIVI 1 0.084% INCLUSIVI	ATTACHED) E E	nd must have a spread of .005 or						
TEST 1 * .097	TEST 2 ▼095		TEST 3 ▼ .096							
RFI DETECTOR OPERATING										
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED		G RANGES SINCE	THE LAST MAIN	TENANCE REPORT:						
REFUSALS 0 (004) 0	(.0509)	(.1014) 0	(.1519)	0 (OVER .19) 0						
List any new parts and describe any alteratic established limits (use other side if necessar Monthly test for Mar/2015 performed monthly t	y).	, vas made to restore	the instrument to	o operate satisfactorily and within						
INSPECTING OFFICER				1						
SIGNATURE			PRINT NAME D. Littlejohn #	230074						
TYPE II PERMIT NUMBER/JEXOPRATION DATE 230074-04/26/2015		- mode Villagia	TELEPHONE NUMBER (816) 436-915							
	lcohol Program, MO De mes Boulevard luff, MO 63901	partment of Health a	nd Senior Service	es, Southeast District Office						



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14220 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 25, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is September 24, 2016 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN08051301 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

		AS IV Serial no: 694881 Version no: 532B TESY RECORD 86389	Temp Nato Time 2181 fir Blank:	Calibration Check: 19 83/04/15 22:62 .855	Subject Name Subject I.D.	Operator Name, J.M.	Location	rocst ton
AS IV Serial no: 894881 Version no: 532)	TEST RDCORD 00308 s/ Temp Date Time 210L		Subject Name	OPETATOR Name, 1.8.	Location			Sabater Trat: Auto Subject Trat: Auto 22 63/84/15 22:18 ,000 22 63/84/15 32:18 ,000 Subject Name Subject T.D.
(S IV Serial not 894581 Version not 532R	EST RECORD 6031 Nale Time	fir Blank: 83/84/15 22:68 .089 Calibration Chack: 22 83/84/15 22:88 .096	Subject Name	ì	Location			AS TU Serial noi 894881 Version noi 5325 Sene Naic Time 2181
Charles Company output destant was in many a many	AS IV Serial no: 094861 Version no: 5326	TEST KITCHED 86314 Solution Pate Time 2181	12 83/84/15 22:17 Subject Name	Subject I.I.	Operator Mane, I.D.			



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



DWON LITTLE JOHN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s)

ALCO-SENSOR IV WIPRINTER, INTOXILYZER 5000

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 04/26/2013

NUMBER 230074

EXPIRES 04/26/2015

Gal Varlend

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

AB-4 (R8-10